

## ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

## STANDARD CERTIFICATE OF BIRTH

State File No. 3418Registered No. 3418

PLACE OF BIRTH

County GilaState Arizona

District or Township

City Miami

or Village

No.

St.

Ward

Full name of child Joseph Leonard Russell

Sex of Child

To be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other

6. Legitimate?

7. Date

Month

Day

Year

Male

5. No., in order of birth

yesAug-1-1927

## FATHER

Full name Charles Russell

Residence

(Usual place of abode)

If non-resident, give place and state.

MiamiArizona

Color or race

Cauc.11. Age at last birthday 37 (Years)

2. Birthplace (city or place)

(State or country)

KoshkongMissouri

3. Occupation

Nature of industry

FiremanMining

Number of children of this mother

Taken as of time of birth of child herein  
certified and including this child.)(a) Born alive and now living 3(b) Born alive but now dead 1(c) Stillborn —21. Were precautions taken against oph-  
thalmia neonatorum?yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 140 A. m. on the date above stated

(Born alive or stillborn)

Signature Lynil M. Brown M.D.Physician

(Physician or midwife)

Address Miami, ArizonaFiled Aug 11, 1927B. E. Tamm

Registrar

Registrar

Month, day, year

123-801-925